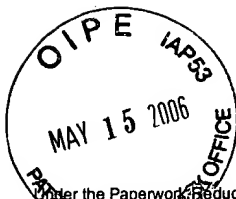




AMENDMENT TRANSMITTAL LETTER				Docket No. 2091-0230P	
Application No. 09/760,843-Conf. #4586	Filing Date January 17, 2001	Examiner T. Duong	Art Unit 2145		
Applicant(s): Hironobu ISHIDA					
Invention: METHOD, APPARATUS, AND RECORDING MEDIUM FOR CONTROLLING IMAGE DATA TRANSFER					
Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	64	- 75 =		x	
Independent Claims	4	- 5 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within third month					1,020.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					1,020.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. <u>02-2448</u> in the amount of \$ _____ A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> A check in the amount of \$ <u>1,020.00</u> is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
Michael K. Mutter Attorney Reg. No.: 29,680				Dated: <u>May 15, 2006</u>	
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000					



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PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	09/760,843-Conf. #4586
TOTAL AMOUNT OF PAYMENT		Filing Date	January 17, 2001
(\$ 1,020.00)		First Named Inventor	Hironobu ISHIDA
		Examiner Name	T. Duong
		Art Unit	2145
		Attorney Docket No.	2091-0230P

METHOD OF PAYMENT (check all that apply)	
<input checked="" type="checkbox"/> Check	<input type="checkbox"/> Credit Card
<input type="checkbox"/> Money Order	<input type="checkbox"/> None
<input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account	Deposit Account Number: <u>02-2448</u>
Deposit Account Name: <u>Birch, Stewart, Kolasch & Birch, LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		<u>Small Entity</u>		<u>Small Entity</u>		<u>Small Entity</u>	
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
							<u>Small Entity</u>
Fee Description							Fee (\$)
Each claim over 20 (including Reissues)							50
Each independent claim over 3 (including Reissues)							200
Multiple dependent claims							360
							180
Total Claims							
<u>64</u> - 75 = _____							
Extra Claims							
<u>-</u> x _____ = _____							
Fee (\$)							
<u>-</u> x _____ = _____							
Fee Paid (\$)							
Multiple Dependent Claims							
Fee (\$)							
Fee Paid (\$)							
Indep. Claims							
<u>4</u> - 5 = _____							
Extra Claims							
<u>-</u> x _____ = _____							
Fee (\$)							
<u>-</u> x _____ = _____							
Fee Paid (\$)							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)	
<u> </u> - 100 = _____		<u> </u>	<u> </u> /50 _____ (round up to a whole number) x _____		<u> </u>	<u> </u>	
4. OTHER FEE(S)							
Non-English Specification, \$130-fee (no small entity discount)							
Other (e.g., late filing surcharge): 1253 Extension for response within third month							1,020.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	29,680
Name (Print/Type)	Michael K. Mutter	Telephone	(703) 205-8000
		Date	May 15, 2006